PLAN/COVERAGE DESCRIPTION	2020 TOTAL MONTHLY PREMIUM	2020 COUNTY SUBSIDY	2020 RETIREE MONTHLY SHARE
EARLY R	ETIREES		
CONTRA COSTA HEALTH PLAN - BASIC PLAN A			
Retiree on Basic Plan A	\$892.18	\$600.51	\$291.67
Retiree & 1 dependent on Basic Plan A	\$1,784.34	\$1,430.76	\$353.58
Retiree & 2 or more dependents on Basic Plan A	\$2,676.54	\$1,430.76	\$1,245.78
CONTRA COSTA HEALTH PLAN - BASIC PLAN B			
Retiree on Basic Plan B	\$989.00	\$611.34	\$377.66
Retiree & 1 dependent on Basic Plan B	\$1,978.00	\$1,452.65	\$525.35
Retiree & 2 or more dependents on Basic Plan B	\$2,967.00	\$1,452.65	\$1,514.35
HEALTH NET HMO PLAN - BASIC PLAN A			
Retiree on Basic Plan A	\$1,761.04	\$853.92	\$907.12
Retiree & 1 dependent on Basic Plan A	\$3,522.08	\$2,094.74	\$1,427.34
Retiree & 2 or more dependents on Basic Plan A	\$5,283.12	\$2,094.74	\$3,188.38
HEALTH NET HMO PLAN - BASIC PLAN B			
Retiree on Basic Plan B	\$1,224.60	\$853.92	\$370.68
Retiree & 1 dependent on Basic Plan B	\$2,449.20	\$2,094.74	\$354.46
Retiree & 2 or more dependents on Basic Plan B	\$3,673.80	\$2,094.74	\$1,579.06
HEALTH NET SMARTCARE HMO A NEW PLAN			
Retiree on Basic Plan A	\$1,322.48	\$853.92	\$468.56
Retiree & 1 dependent on Basic Plan A	\$2,644.96	\$2,094.74	\$550.22
Retiree & 2 or more dependents on Basic Plan A	\$3,967.44	\$2,094.74	\$1,872.70
HEALTH NET SMARTCARE HMO B NEW PLAN			
Retiree on Basic Plan B	\$942.98	\$853.92	\$89.06
Retiree & 1 dependent on Basic Plan B	\$1,885.96	\$1,885.95	\$0.01
Retiree & 2 or more dependents on Basic Plan B	\$2,828.94	\$2,094.74	\$734.20
HEALTH NET CA & OOS PPO PLAN - BASIC PLAN A			
Retiree on PPO Basic Plan A	\$2,691.46	\$753.81	\$1,937.65
Retiree & 1 dependent on PPO Basic Plan A	\$5,382.92	\$1,790.70	\$3,592.22
Retiree & 2 or more dependents on PPO Basic Plan A	\$8,074.38	\$1,790.70	\$6,283.68

PLAN/COVERAGE DESCRIPTION	2020 TOTAL MONTHLY PREMIUM	2020 COUNTY SUBSIDY	2020 RETIREE MONTHLY SHARE
EARLY	RETIREES		
KAISER HIGH DEDUCTIBLE			
Retiree on Basic Plan	\$560.90	\$560.89	\$0.01
Retiree & 1 dependent on Basic Plan	\$1,121.80	\$1,121.79	\$0.01
Retiree & 2 or more dependents on Basic Plan	\$1,682.70	\$1,432.42	\$250.28
KAISER PERMANENTE - BASIC PLAN A			
Retiree on Basic Plan A	\$879.23	\$614.78	\$264.45
Retiree & 1 dependent on Basic Plan A	\$1,758.46	\$1,432.42	\$326.04
Retiree & 2 or more dependents on Basic Plan A	\$2,637.69	\$1,432.42	\$1,205.27
KAISER PERMANENTE - BASIC PLAN B			
Retiree on Basic Plan B	\$698.82	\$614.78	\$84.04
Retiree & 1 dependent on Basic Plan B	\$1,397.64	\$1,397.63	\$0.01
Retiree & 2 or more dependents on Basic Plan B	\$2,096.46	\$1,432.42	\$664.04
TEAMSTERS 856 TRUST FUND KP HEALTH PLAN			
Retiree on Basic Plan	\$690.80	\$614.78	\$76.02
Retiree & 1 dependent on Basic Plan	\$1,423.76	\$1,423.75	\$0.01
Retiree & 2 or more dependents on Basic Plan	\$2,043.36	\$1,432.42	\$610.94

PLAN/COVERAGE DESCRIPTION	2020 T MON [*] PREM	ГНLҮ	2020 COUNTY SUBSIDY	2020 RETIREE MONTHLY SHARE
SENIORITY PLUS/SE	NIOR ADVANTAGE PLANS			
HEALTH NET SENIORITY PLUS (HNSP) PLAN A				
Retiree on HNSP Plan A	\$663	3.07	\$514.27	\$148.80
Retiree & 1 dependent on HNSP Plan A	\$1,32	6.14	\$1,028.55	\$297.59
Retiree & 2 dependents on HNSP Plan A	\$1,98	9.21	\$1,542.83	\$446.38
HEALTH NET SENIORITY PLUS (HNSP) PLAN B				
Retiree on HNSP Plan B	\$556	5.65	\$514.27	\$42.38
Retiree & 1 dependent on HNSP Plan B	\$1,11	3.30	\$1,028.55	\$84.75
Retiree & 2 dependents on HNSP Plan B	\$1,66	9.95	\$1,542.83	\$127.12
HEALTH NET CA & OOS PPO PLAN A WITH MEDICARE PARTS A & B				
Retiree on PPO Medicare Plan A	\$1,23	1.57	\$618.43	\$613.14
Retiree & 1 dependent on PPO Medicare Plan A	\$2,46	3.14	\$1,236.73	\$1,226.41
Retiree & 2 dependents on PPO Medicare Plan A	\$3,69	4.71	\$1,236.73	\$2,457.98
KAISER PERMANENTE SENIOR ADVANTAGE (KPSA) PLAN A				
Retiree on KPSA Plan A	\$386	5.21	\$295.00	\$91.21
Retiree & 1 dependent on KPSA Plan A	\$1,04	2.60	\$796.70	\$245.90
Retiree & 2 dependents on KPSA Plan A	\$1,04	2.60	\$1,042.59	\$0.01
KAISER PERMANENTE SENIOR ADVANTAGE (KPSA) PLAN B				
Retiree on KPSA Plan B	\$292	2.77	\$292.76	\$0.01
Retiree & 1 dependent on KPSA Plan B	\$790	0.08	\$790.07	\$0.01
Retiree & 2 dependents on KPSA Plan B	\$790	0.08	\$790.07	\$0.01

PLAN/COVERAGE DESCRIPTION	2020 TOTAL MONTHLY PREMIUM	2020 COUNTY SUBSIDY	2020 RETIREE MONTHLY SHARE
MEDICARE COORDINATION OF BENEFITS PLA	ANS (COB)		
CONTRA COSTA HEALTH PLAN - MEDICARE COORDINATION OF BENEFITS (COB) PLAN A			
Retiree on Medicare COB Plan A	\$442.80	\$279.22	\$163.58
Retiree & 1 dependent on Medicare COB Plan A	\$885.61	\$558.44	\$327.17
Retiree & 2 dependents on Medicare COB Plan A	\$1,328.41	\$558.44	\$769.97
CONTRA COSTA HEALTH PLAN - MEDICARE COORDINATION OF BENEFITS (COB) PLAN B			
Retiree on Medicare COB Plan B	\$456.09	\$287.59	\$168.50
Retiree & 1 dependent on Medicare COB Plan B	\$912.18	\$575.18	\$337.00
Retiree & 2 dependents on Medicare COB Plan B	\$1,368.26	\$575.18	\$793.08
HEALTH NET MEDICARE COORDINATION OF BENEFITS PLAN A (HNCOB)			
Retiree on HNCOB Plan	\$899.85	\$563.32	\$336.53
Retiree & 1 dependent (2 on HNCOB)	\$1,799.70	\$1,126.65	\$673.05
Retiree & 2 dependents (3 on HNCOB)	\$2,699.55	\$1,126.65	\$1,572.90
HEALTH NET MEDICARE COORDINATION OF BENEFITS PLAN B (HNCOB)			
Retiree on HNCOB Plan	\$836.62	\$563.32	\$273.30
Retiree & 1 dependent (2 on HNCOB)	\$1,673.24	\$1,126.65	\$546.59
Retiree & 2 dependent (3 on HNCOB)	\$2,509.86	\$1,126.65	\$1,383.21
HEALTH NET SMARTCARE MEDICARE COORDINATION OF BENEFITS PLAN A (HNCOB) NEW PLAN			
Retiree on HNCOB Plan	\$891.07	\$563.32	\$327.75
Retiree & 1 dependent (2 on HNCOB)	\$1,782.14	\$1,126.65	\$655.49
Retiree & 2 dependents (3 on HNCOB)	\$2,673.21	\$1,126.65	\$1,546.56
HEALTH NET SMARTCARE MEDICARE COORDINATION OF BENEFITS PLAN B (HNCOB) NEW PLAN			
Retiree on HNCOB Plan	\$816.21	\$563.32	\$252.89
Retiree & 1 dependent (2 on HNCOB)	\$1,632.42	\$1,126.65	\$505.77
Retiree & 2 dependent (3 on HNCOB)	\$2,448.63	\$1,126.65	\$1,321.98

PLAN/COVERAGE DESCRIPTION	2020 TOTAL MONTHLY PREMIUM	2020 COUNTY SUBSIDY	2020 RETIREE MONTHLY SHARE
COMBINATION PLANS			
COMBINATION OF CONTRA COSTA HEALTH PLAN - BASIC PLAN A & MEDICARE COB PLAN A			
Retiree on Medicare COB Plan A, and, 1 or more dependents on Basic Plan A	\$1,416.98	\$1,234.34	\$182.64
Retiree & 1 dependent on Medicare COB Plan A , and, 1 or more dependents on Basic Plan A	\$1,328.41	\$1,228.76	\$99.65
Retiree on Basic Plan A, and, 1 dependent on Medicare COB Plan A	\$1,416.98	\$1,234.34	\$182.64
Retiree on Basic Plan A, and, 2 or more dependents on Medicare COB Plan A	\$1,328.41	\$1,228.76	\$99.65
Retiree & 1 dependent on Basic Plan A, and, 1 dependent on Medicare COB Plan A	\$1,416.98	\$1,234.34	\$182.64
COMBINATION OF CONTRA COSTA HEALTH PLAN - BASIC PLAN B & MEDICARE COB PLAN B			
Retiree on Medicare COB Plan B, and, 1 or more dependents on Basic Plan B	\$1,459.48	\$1,249.14	\$210.34
Retiree & 1 dependent on Medicare COB Plan B , and, 1 or more dependents on Basic Plan B	\$1,368.26	\$1,265.62	\$102.64
Retiree on Basic Plan B, and, 1 dependent on Medicare COB Plan B	\$1,459.48	\$1,271.37	\$188.11
Retiree on Basic Plan B, and, 2 or more dependents on Medicare COB Plan B	\$1,368.26	\$1,265.62	\$102.64
Retiree & 1 dependent on Basic Plan B, and, 1 dependent on Medicare COB Plan B	\$1,459.48	\$1,249.14	\$210.34
COMBINATION OF HEALTH NET BASIC PLAN A AND HEALTH NET SENIORITY PLUS PLAN A (HNSP)			
Retiree on HNSP Plan A, and, 1 dependent on Basic Plan A	\$2,424.11	\$1,370.24	\$1,053.87
Retiree on HNSP Plan A, and, 2 dependents on Basic Plan A	\$4,185.15	\$2,611.07	\$1,574.08
Retiree on HNSP Plan A, and, 3 dependents on Basic Plan A	\$4,185.15	\$2,611.07	\$1,574.08
Retiree & 1 dependent on HNSP Plan A, and, 1 dependent on Basic Plan A	\$3,087.18	\$1,886.57	\$1,200.61
Retiree on Basic Plan A, and, 1 dependent on HNSP Plan A	\$2,424.11	\$1,370.24	\$1,053.87
Retiree & 1 dependent on Basic Plan A, and, 1 dependent on HNSP Plan A	\$4,185.15	\$2,611.07	\$1,574.08
COMBINATION OF HEALTH NET BASIC PLAN B AND HEALTH NET SENIORITY PLUS PLAN B (HNSP)			
Retiree on HNSP Plan B, and, 1 dependent on Basic Plan B	\$1,781.25	\$1,370.24	\$411.01
Retiree on HNSP Plan B, and, 2 dependents on Basic Plan B	\$3,005.85	\$2,611.07	\$394.78
Retiree on HNSP Plan B, and, 3 dependents on Basic Plan B	\$3,005.85	\$2,611.07	\$394.78
Retiree & 1 dependent on HNSP Plan B, and, 1 dependent on Basic Plan B	\$2,337.90	\$1,886.57	\$451.33
Retiree on Basic Plan B, and, 1 dependent on HNSP Plan B	\$1,781.25	\$1,370.24	\$411.01
Retiree & 1 dependent on Basic Plan B, and, 1 dependent on HNSP Plan B	\$3,005.85	\$2,611.07	\$394.78

PLAN/COVERAGE DESCRIPTION	2020 TOTAL MONTHLY PREMIUM	2020 COUNTY SUBSIDY	2020 RETIREE MONTHLY SHARE
COMBINATION PLANS			
COMBINATION OF HEALTH NET (SMARTCARE) BASIC PLAN A AND HEALTH NET SENIORITY PLUS PLAN A (HNSP)	NEW PLAN		
Retiree on HNSP Plan A, and, 1 dependent on Basic Plan A	\$1,985.55	\$1,370.24	\$615.31
Retiree on HNSP Plan A, and, 2 dependents on Basic Plan A	\$3,308.03	\$2,611.07	\$696.96
Retiree on HNSP Plan A, and, 3 dependents on Basic Plan A	\$3,308.03	\$2,611.07	\$696.96
Retiree & 1 dependent on HNSP Plan A, and, 1 dependent on Basic Plan A	\$2,648.62	\$1,886.57	\$762.05
Retiree on Basic Plan A, and, 1 dependent on HNSP Plan A	\$1,985.55	\$1,370.24	\$615.31
Retiree & 1 dependent on Basic Plan A, and, 1 dependent on HNSP Plan A	\$3,308.03	\$2,611.07	\$696.96
COMBINATION OF HEALTH NET (SMARTCARE) BASIC PLAN B AND HEALTH NET SENIORITY PLUS PLAN B (HNSP)	NEW PLAN		
Retiree on HNSP Plan B, and, 1 dependent on Basic Plan B	\$1,499.63	\$1,370.24	\$129.39
Retiree on HNSP Plan B, and, 2 dependents on Basic Plan B	\$2,442.61	\$2,442.60	\$0.01
Retiree on HNSP Plan B, and, 3 dependents on Basic Plan B	\$2,442.61	\$2,442.60	\$0.01
Retiree & 1 dependent on HNSP Plan B, and, 1 dependent on Basic Plan B	\$2,056.28	\$1,886.57	\$169.71
Retiree on Basic Plan B, and, 1 dependent on HNSP Plan B	\$1,499.63	\$1,370.24	\$129.39
Retiree & 1 dependent on Basic Plan B, and, 1 dependent on HNSP Plan B	\$2,442.61	\$2,442.60	\$0.01
COMBINATION OF HEALTH NET CA & OOS PPO PLAN A - BASIC PLAN & PPO MEDICARE PLAN A			
Retiree on PPO Medicare Plan A, and, 1 dependent on PPO Basic Plan A	\$3,923.03	\$1,372.24	\$2,550.79
Retiree on PPO Basic Plan A, and, 1 dependent on PPO Medicare Plan A	\$3,923.03	\$1,372.24	\$2,550.79
Retiree & 1 dependent on PPO Medicare Plan A, and, 1 dependent on PPO Basic Plan A	\$5,154.60	\$1,990.54	\$3,164.06
Retiree on PPO Basic Plan A, and, 2 dependents on PPO Medicare Plan A	\$5,154.60	\$1,990.54	\$3,164.06
Retiree & 1 dependent on PPO Medicare Plan A, and, 2 dependents on PPO Basic Plan A	\$5,154.60	\$1,990.54	\$3,164.06
Retiree on PPO Medicare Plan A, and, 3 dependents on PPO Basic Plan A	\$6,614.49	\$1,990.54	\$4,623.95
COMBINATION OF KAISER BASIC PLAN A AND KPSA PLAN A			
Retiree on KPSA Plan A, and, 1 dependent on Basic Plan A	\$1,265.44	\$1,158.55	\$106.89
Retiree on Basic Plan A, and, 1 dependent on KPSA Plan A	\$1,535.62	\$1,158.55	\$377.07
Retiree on KPSA Plan A, and, 2 or more dependents on Basic Plan A	\$2,144.67	\$1,158.55	\$986.12
Retiree & 1 dependent on KPSA Plan A, and, 1 or more dependent on Basic Plan A	\$1,921.83	\$1,121.04	\$800.79
Retiree & 1 or more dependents on Basic Plan A, and, 1 dependent on KPSA Plan A	\$2,414.85	\$1,121.04	\$1,293.81
COMBINATION OF KAISER BASIC PLAN B AND KPSA PLAN B			
Retiree on KPSA Plan B, and, 1 dependent on Basic Plan B	\$991.59	\$991.58	\$0.01
Retiree on Basic Plan B, and, 1 dependent on KPSA Plan B	\$1,196.13	\$1,158.55	\$37.58
Retiree on KPSA Plan B, and, 2 or more dependents on Basic Plan B	\$1,690.41	\$1,158.55	\$531.86
Retiree & 1 dependent on KPSA Plan B, and, 1 or more dependent on Basic Plan B	\$1,488.90	\$1,121.04	\$367.86
Retiree & 1 or more dependents on Basic Plan B, and, 1 dependent on KPSA Plan B	\$1,894.95	\$1,121.04	\$773.91

PLAN/COVERAGE DESCRIPTION	2020 TOTAL MONTHLY PREMIUM	2020 COUNTY SUBSIDY	2020 RETIREE MONTHLY SHARE
COORDINATION OF BENEFITS A	AND COMBINATION PLANS		
COMBINATION OF HEALTH NET BASIC PLAN A AND HEALTH NET COORDINATION OF BE	NEFITS PLAN (HNCOB)		
Retiree on HNCOB, and, 1 dependent on Basic Plan A	\$2,660.89	\$1,417.24	\$1,243.65
Retiree on Basic Plan A, and, 1 dependent on HNCOB	\$2,660.89	\$1,417.24	\$1,243.65
Retiree on HNCOB, and, 2 dependents on HN Basic Plan A	\$4,421.93	\$2,658.07	\$1,763.86
Retiree on HNCOB, and, 3 dependents on HN Basic Plan A	\$4,421.93	\$2,658.07	\$1,763.86
Retiree & 1 dependent on HNCOB, and, 1 dependent on Basic Plan A	\$3,560.74	\$1,980.57	\$1,580.17
Retiree on Basic Plan A, and 2 dependents on HNCOB	\$3,560.74	\$1,980.57	\$1,580.17
COMBINATION OF HEALTH NET BASIC PLAN B AND HEALTH NET COORDINATION OF BEI	NEFITS PLAN (HNCOB)		
Retiree on HNCOB, and, 1 dependent on Basic Plan B	\$2,061.22	\$1,417.24	\$643.98
Retiree on Basic Plan B, and, 1 dependent on HNCOB	\$2,061.22	\$1,417.24	\$643.98
Retiree on HNCOB, and, 2 dependents on HN Basic Plan B	\$3,285.82	\$2,658.07	\$627.75
Retiree on HNCOB, and, 3 dependents on HN Basic Plan B	\$3,285.82	\$2,658.07	\$627.75
Retiree & 1 dependent on HNCOB, and, 1 dependent on Basic Plan B	\$2,897.84	\$1,980.57	\$917.27
Retiree on Basic Plan B, and 2 dependents on HNCOB	\$2,897.84	\$1,980.57	\$917.27
COMBINATION OF HEALTH NET SMARTCARE BASIC PLAN A AND HEALTH NET COORDIN	ATION OF BENEFITS PLAN (HNCOB) NEW	PLAN	
Retiree on HNCOB, and, 1 dependent on Basic Plan A	\$2,213.55	\$1,417.24	\$796.31
Retiree on Basic Plan A, and, 1 dependent on HNCOB	\$2,213.55	\$1,417.24	\$796.31
Retiree on HNCOB, and, 2 dependents on HN Basic Plan A	\$3,536.03	\$2,658.07	\$877.96
Retiree on HNCOB, and, 3 dependents on HN Basic Plan A	\$3,536.03	\$2,658.07	\$877.96
Retiree & 1 dependent on HNCOB, and, 1 dependent on Basic Plan A	\$3,104.62	\$1,980.57	\$1,124.05
Retiree on Basic Plan A, and 2 dependents on HNCOB	\$3,104.62	\$1,980.57	\$1,124.05
COMBINATION OF HEALTH NET SMARTCARE BASIC PLAN B AND HEALTH NET COORDINA	ATION OF BENEFITS PLAN (HNCOB) NEW	PLAN	
Retiree on HNCOB, and, 1 dependent on Basic Plan B	\$1,759.19	\$1,417.24	\$341.95
Retiree on Basic Plan B, and, 1 dependent on HNCOB	\$1,759.19	\$1,417.24	\$341.95
Retiree on HNCOB, and, 2 dependents on HN Basic Plan B	\$2,702.17	\$2,658.07	\$44.10
Retiree on HNCOB, and, 3 dependents on HN Basic Plan B	\$2,702.17	\$2,658.07	\$44.10
Retiree & 1 dependent on HNCOB, and, 1 dependent on Basic Plan B	\$2,575.40	\$1,980.57	\$594.83
Retiree on Basic Plan B, and 2 dependents on HNCOB	\$2,575.40	\$1,980.57	\$594.83

PLAN/COVERAGE DESCRIPTION	2020 TOTAL MONTHLY PREMIUM	2020 COUNTY SUBSIDY	2020 RETIREE MONTHLY SHARE	
COORDINATION OF BENEFITS AND COMBINATION	N PLANS			
COMBINATION OF HEALTH NET SENIORITY PLUS PLAN A (HNSP) AND COORDINATION OF BENEFITS (COB) PLAN	S			
Retiree on HNSP Plan A, and, dependent on Health Net Coordination of Benefits (COB) Plan	\$1,562.92	\$1,079.65	\$483.27	
Retiree on Health Net Coordination of Benefits (COB) Plan, and, dependent on HNSP Plan A	\$1,562.92	\$1,079.65	\$483.27	
COMBINATION OF HEALTH NET SENIORITY B PLUS (HNSP) AND COORDINATION OF BENEFITS (COB) PLANS				
Retiree on HNSP Plan B, and, dependent on Health Net Coordination of Benefits (COB) Plan	\$1,393.27	\$1,079.65	\$313.62	
Retiree on Health Net Coordination of Benefits (COB) Plan, and, dependent on HNSP Plan B	\$1,393.27	\$1,079.65	\$313.62	
COMBINATION OF HEALTH NET SENIORITY PLUS PLAN A (HNSP) AND COORDINATION OF BENEFITS (COB) PLA	NS SMARTCARE N	EW PLAN		
Retiree on HNSP Plan A, and, dependent on Health Net Coordination of Benefits (COB) Plan SMARTCARE	\$1,554.14	\$1,079.65	\$474.49	
Retiree on Health Net Coordination of Benefits (COB) Plan, and, dependent on HNSP Plan A	\$1,554.14	\$1,079.65	\$474.49	
COMBINATION OF HEALTH NET SENIORITY B PLUS (HNSP) AND COORDINATION OF BENEFITS (COB) PLANS SMARTCARE NEW PLAN				
Retiree on HNSP Plan B, and, dependent on Health Net Coordination of Benefits (COB) Plan	\$1,372.86	\$1,079.65	\$293.21	
Retiree on Health Net Coordination of Benefits (COB) Plan, and, dependent on HNSP Plan B	\$1,372.86	\$1,079.65	\$293.21	

PLAN/COVERAGE DESCRIPTION		2020 TOTAL MONTHLY PREMIUM	2020 COUNTY SUBSIDY	2020 RETIREE MONTHLY SHARE
	DENTAL			
DELTA DENTAL PREMIER PPO - \$1,800 ANNUAL MAXIMUN	1			
	Retiree	\$46.52	\$41.60	\$4.92
For CCHP Plans	Retiree +1	\$105.08	\$93.72	\$11.36
	Retiree + 2 or more	\$105.08	\$93.72	\$11.36
	Retiree	\$46.52	\$33.11	\$13.41
For Health Net Plans	Retiree +1	\$105.08	\$74.59	\$30.49
	Retiree + 2 or more	\$105.08	\$74.59	\$30.49
	Retiree	\$46.52	\$33.11	\$13.41
For Kaiser Permanente Plans	Retiree +1	\$105.08	\$74.59	\$30.49
	Retiree + 2 or more	\$105.08	\$74.59	\$30.49
	Retiree	\$46.52	\$42.44	\$4.08
Without a Health Plan	Retiree +1	\$105.08	\$95.62	\$9.46
	Retiree + 2 or more	\$105.08	\$95.62	\$9.46
DELTA CARE (HMO)				
	Retiree	\$29.06	\$28.48	\$0.58
For CCHP Plans	Retiree +1	\$62.81	\$61.55	\$1.26
	Retiree + 2 or more	\$62.81	\$61.55	\$1.26
	Retiree	\$29.06	\$22.67	\$6.39
For Health Net Plans	Retiree +1	\$62.81	\$48.99	\$13.82
	Retiree + 2 or more	\$62.81	\$48.99	\$13.82
	Retiree	\$29.06	\$22.67	\$6.39
For Kaiser Permanente Plans	Retiree +1	\$62.81	\$48.99	\$13.82
	Retiree + 2 or more	\$62.81	\$48.99	\$13.82
	Retiree	\$29.06	\$29.05	\$0.01
Without a Health Plan	Retiree +1	\$62.81	\$62.80	\$0.01
	Retiree + 2 or more	\$62.81	\$62.80	\$0.01